

MDHHS Zika Virus Specimen Collection and Transport Guidelines

Serum

Specimens:

Submit at least 3-4 mL of serum, appropriate for both PCR and serology. Collect whole blood in a red top tube and separate serum from the cells within 4 hours of collection (serum separators can adversely impact PCR sensitivity). Label the specimen tube with the patient's name (first and last), date of birth, specimen type, and date of collection. CDC is also accepting samples of amniotic fluid, tissue or products of conception, CSF from patients with neurologic symptoms, saliva and urine. For instructions regarding samples other than serum, contact Janice Matthews-Greer, PhD, DABMM (517) 335-8099, matthewsgreerj@michigan.gov.

Storage:

Once collected, place the specimen at 2-8°C (refrigerated temperatures) until ready to ship. Specimens should be shipped to MDHHS Bureau of Laboratories on cold packs within 24 hours from the time of collection. Use Specimen Collection kit 8A which can be obtained by contacting the Laboratory Support Unit: http://www.michigan.gov/mdhhs/0,5885,7-339-71551_2945_5103_5278-14799--,00.html.

Documents to Accompany Specimen:

- 1) **Zika Virus Supplemental Questionnaire** must be completed for each patient.
http://www.michigan.gov/documents/mdhhs/Michigan_Zika_Virus_Patient_Clinical_Form_514582_7.pdf
Can be completed electronically, or printed and filled out. Must be submitted to local health department for authorization to submit for testing.
- 2) **CDC form 50.34**, downloaded from the MDHHS website (use Internet Explorer web browser if problems) at http://www.michigan.gov/documents/mdch/HUMAN_form-50-34_410210_7.pdf.
MUST be completed electronically, then printed to accompany specimen. One form is required for each specimen. Under test order name, choose Arbovirus Serology or Arbovirus Molecular Detection. Fill out as much patient information as possible in the PDF form. On the second page, in the box marked "Brief Clinical Summary" include a brief summary and write "suspect Zika virus" or write "Zika Virus" in the "Suspected Agent" box in the upper left corner of 1st page after you save and print the form for shipping.
- 3) **MDHHS Microbiology/Virology Test Request Form** (DCH-0583)
http://www.michigan.gov/documents/DCH-0583TEST_REQUEST_7587_7.pdf
Must be printed and filled out to accompany specimen. Complete the top of the form with the **Submitter** information. At the bottom of the form: Indicate "Specimen Source" and under "Tests that Require MDHHS Approval", check "Other" and type or write in "Zika virus".

Shipping:

Specimens should be shipped Category B (UN3373 Biological Substances) on cold packs. For detailed instructions on packaging serum samples: http://www.michigan.gov/documents/DCH-0811_7495_7.pdf.

Specimens should be shipped to arrive at MDHHS BOL Monday through Saturday. Ship to:

Michigan Department of Health and Human Services
Bureau of Laboratories
3350 North Martin Luther King Jr. Blvd., Building 44, Room 155
P.O. Box 30035
Lansing, Michigan 48909

For additional questions about shipping specimens to MDHHS, contact the DASH unit at 517-335-8059.